

## FACSIMILE COVER SHEET

**Licata & Tyrrell P.C.**

66 E. Main Street  
Marlton, New Jersey

Tel: (856) 810-1515

Fax: (856) 810-1454

September 3, 2002

**TO: Sean McGarry**

**GROUP: 1645**

**FAX NUMBER: 1-703-746-3128**

**ATTORNEY DOCKET NO.: ISPH-0591**

**SERIAL NO.: 09/917,963**

**FILED: July 30, 2001**

**NUMBER OF PAGES: 6**  
(including this sheet)

**MESSAGE:**

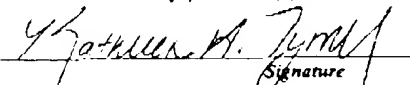
**URGENT! PLEASE DELIVER IMMEDIATELY UPON RECEIPT. THANK YOU!**

\* \* \* \* \*

If you have any questions, or did not receive the proper number of pages, or had trouble during transmission, please call 856-810-1515.

### CONFIDENTIALITY NOTICE

The information contained in this facsimile message is legally privileged and confidential, and intended only for the use of the individual(s) and/or entity(ies) named above. If you are not the intended recipient, you are hereby notified that any unauthorized disclosure, copying, distribution or taking of any action in reliance on the contents of the telecopied materials is strictly prohibited and review by any individual other than the intended recipient shall not constitute

AMENDMENT TRANSMITTAL LETTER (Small Entity)				Docket No.	
Applicant(s): Crooke and Graham				ISPH-0591	
Serial No. 09/917,963	Filing Date July 30, 2001	Examiner S. McGarry	Group Art Unit 1645		
Invention: ANTISENSE MODULATION OF MICROSOMAL TRIGLYCERIDE TRANSFER PROTEIN EXPRESSION					
<u>TO THE ASSISTANT COMMISSIONER FOR PATENTS:</u>					
Transmitted herewith is an amendment in the above-identified application.					
<input checked="" type="checkbox"/> Small Entity status of this application has been established under 37 CFR 1.27 by a verified statement previously submitted.					
<input type="checkbox"/> A verified statement to establish Small Entity status under 37 FR 1.27 is enclosed.					
The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	19 -	20 =	0 x	\$9.00	\$0.00
INDEP. CLAIMS	2 -	3 =	0 x	\$42.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
<input checked="" type="checkbox"/> No additional fee is required for amendment.					
<input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ A duplicate copy of this sheet is enclosed.					
<input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed.					
<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-1619 A duplicate copy of this sheet is enclosed.					
<input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16.					
<input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.					
 Kathleen A. Tyrrell Reg. No. 38,350 Licata & Tyrrell P.C. 66 E. Main Street Marlton, NJ 08053 Tel: 856-810-1515 Fax: 856-810-1454			Dated: September 3, 2002		
Signature of Person Mailing Correspondence					
Typed or Printed Name of Person Mailing Correspondence					

